

# IMPLEMENTATION GUIDE

## The ROSE Project

*Using a Research-tested Intervention Program (RTIP) to develop  
a process model for program delivery in the practice setting*

Note: Refer to “Using What Works: Adapting Evidence-Based Programs To Fit Your Needs” and the handouts in Modules 4 and 5 to modify and evaluate this program to meet the needs of your organization and audience.

“Using What Works” is available online at  
[http://cancercontrol.cancer.gov/use\\_what\\_works/start.htm](http://cancercontrol.cancer.gov/use_what_works/start.htm).

To receive training on “Using What Works,” contact the NCI Cancer Information Service and speak to a Partnership Program Representative in your area. This information is available online at <http://cancercontrolplanet.cancer.gov/partners/index.jsp?cctopic=C>.

### I. Program Administration (Type of Staffing and Functions Needed)

#### Project Manager

- Directs the implementation and evaluation of the project.
- Oversees the coordination of recruitment, enrollment, monitoring, and followup activities for the project.
- Coordinates hiring and oversight of Lay Health Advisors and any other personnel needed (such as research staff, if applicable).
- Serves as the public liaison and community representative for the project.

#### LHA Supervisor

- Assists with the development and implementation of project activities.
- Supervises the Lay Health Advisors delivering the intervention.
- Assists Project Manager with project tracking and reporting, hiring and training of personnel, and other activities as needed.

#### Lay Health Advisor

- Conducts three in-home education sessions with participants, each session 30 to 90 minutes in duration

- After the first and second home visits, contacts participants by phone to assist in making a mammography appointment and discuss any remaining barriers to obtaining a mammogram.
- Determines stage of change and mails appropriate staging card.
- Coordinates the mailing of two postcard reminders that address the woman's stage of change in relation to obtaining a mammogram and offer assistance in setting up a mammogram appointment.
- May serve as a link between health care provider, the project, and the participant.

## **II. Program Delivery**

**For additional information on modifying program materials, refer to Module 4, Handouts #2 and #6 in “Using What Works”: Adaptation Guidelines and Case Study Application.**

### **A. Program Materials (All listed materials can be viewed and/or downloaded from the Products Page):**

- CHE (Community Health Education) Manual
- Visit 1 materials
- Visit 2 materials
- Visit 3 materials
- Phone call follow-up materials (month 2) (includes a mailed Staging Card)
- Phone call follow-up materials (month 6) (includes a mailed Staging Card)

### **B. Program Implementation:**

The steps used to implement this program are as follows:

**Step 1:** Project Manager (and/or other project staff) identifies clinics and health care providers in the community and builds relationships with these providers to identify eligible women to participate in the intervention.

**Step 2:** Using existing ROSE Project materials, Project Manager (and/or other project staff) develops site-specific intervention plans and modifies materials and protocols if needed.

**Step 3:** Project Manager (and/or other staff) hires and trains Lay Health Advisors (LHAs).

**Step 4:** With supervision of LHA Supervisors, LHAs conduct home visits and phone and postcard followups.

### **III. Program Evaluation**

**For additional information on planning and adapting an evaluation, refer to Handouts #2-8 in Module 5 of “Using What Works.”**

For further assistance in designing and conducting an evaluation, go to the Cancer Control P.L.A.N.E.T. Web site and see Step 2: Identify potential partners to find a research partner in your area. This information is available online at

<http://cancercontrolplanet.cancer.gov/partners/researcher.jsp?cctopic=0>.